

CITY OF COVENTRY

---

# ANNUAL REPORT

OF THE  
SCHOOL MEDICAL OFFICER  
FOR THE YEAR

1949



INSTITUTE OF SOCIAL  
MEDICINE

10. MARKS ROAD,  
OXFORD



CORLEY OPEN AIR SCHOOL



CITY OF COVENTRY

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## SCHOOL HEALTH SERVICE.

### SPECIAL SERVICES SUB-COMMITTEE.

*Chairman* :—COUNCILLOR MRS. OSBORN.

*Vice-Chairman* :—ALDERMAN MRS. CANT.

MR. ALDERMAN GARDNER.

MR. „ F. LEE.

MRS. „ SMITH.

MR. „ STRINGER.

MRS. COUNCILLOR ALLEN.

MR. „ HARLEY.

MR. ALDERMAN FENNELL.

MR. COUNCILLOR STANLEY.

*Co-opted Members* :—MR. G. H. ISON.

MR. J. JOHNSON.

MRS. M. E. KIMPTON.

MR. W. SPENCER.

MR. H. T. SUDDENS.

MRS. J. WALTERS.

*Director of Education* :—MR. W. L. CHINN, M.A.

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### SCHOOL HEALTH SERVICE STAFF.

School Medical Officer (and T. M. CLAYTON, M.D., B.S., B.Hy.,  
Medical Officer of Health) D.P.H.

Deputy School Medical Officer  
(and Deputy Medical  
Officer of Health) ... A. F. JARVIE, M.B., Ch.B., D.P.H.

Senior Assistant School	{	C. G. WOOLGROVE, M.B., Ch.B., D.P.H. (Resigned August, 1949).
Medical Officer ...		M. M. R. GAFFNEY, M.B., B.Ch., B.A.O., D.P.H., L.M., D.C.H. (Appointed September, 1949).



# SCHOOL HEALTH SERVICE STAFF—cont.

Assistant School Medical Officers ... ..	{	W. C. COLLINS, M.B., Ch.B., B.A.O., D.P.H., B.Sc.(P.H.), L.M. (Resigned May, 1949).
		D. D. JONES, M.D., Ch.B., D.C.H.
		M. S. MARTIN, M.B., Ch.B. (Appointed September, 1949).
		MARGARET J. MOIR, M.A., M.D., D.P.H.
		ANDREW C. ROSS, M.B., Ch.B., D.P.H. (Appointed October, 1949)
	{	JULIE M. WILSON, M.B., B.Ch., B.A.O. (Part-time—Resigned December, 31st, 1949).
Medical Officer, 'Town Thorns.'		H. KENYON, M.B., Ch.B. (Part-time).
Medical Officer, Wyre Farm Camp School ... ..		J. S. JEROME, M.A., B.M., B.Ch. (Part-time).
Pædiatric Specialist and Heart and Rheumatic Consultant		H. PARRY WILLIAMS, M.R.C.P., M.R.C.S., L.R.C.P. (Part-time).
School Oculist ... ..		J. W. BISHOP, M.B., Ch.B., L.R.C.P., M.R.C.S., D.O.M.S. (Part-time).
Ear, Nose and Throat Surgeons	{	H. S. KANDER, F.R.C.S., M.R.C.S., L.R.C.P. (Part-time).
		W. OGILVY REID, M.A., B.Sc., M.B., Ch.B., F.R.C.S. (Part-time).
Senior School Dentist ... ..		M. RAESIDE, L.D.S.
Assistant School Dentists ...	{	E. K. BREAKSPEAR, L.D.S. (Resigned October, 1949).
		S. F. POLLEY, M.R.C.S., L.R.C.P., D.A., L.D.S. (Resigned August, 1949).
		J. A. SMITH, L.D.S.
		K. J. TIMMS, L.D.S. (Resigned September, 1949).
		R. B. VAUSE, L.D.S. (Resigned July, 1949).
Physiotherapist (Spastics) ...		MISS R. A. HYATT, M.C.S.T. (Voluntary).
Speech Therapist ... ..		MISS B. CARR, L.C.S.T.
Chiropodist ... ..	{	MRS. M. J. PEACOCK, M.Ch.S. (Resigned October, 1949).
		MR. A. T. E. FREKE, M.Ch.S., M.R.I.P.H.H. (Appointed October, 1949).
Orthopists ... ..	{	MRS. G. HARRISON, D.B.O. (Resigned May, 1949).
		MISS A. PRITTY, D.B.O.
		MISS M. M. VANNER, D.B.O.B. (Appointed July, 1949).

# *SCHOOL HEALTH SERVICE STAFF—cont.*

Superintendent School Nurse	MRS. B. E. MACKIE, S.R.N., S.C.M., H. V. Certificate.
School Nurses ...	MISS M. E. ABSALOM, S.R.N. (Neurological Certificate).
	MISS W. L. BAKER, S.R.N., S.C.M.
	MISS O. A. BALL, S.R.N.
	MISS E. C. BATSFORD, S.R.N.
	MISS M. BENNETT, S.R.N., S.C.M., Health Visitor's Certificate, Cert. London Hospital for Ear, Nose and Throat.
	MRS. B. BRAND, S.R.N.
	MRS. G. L. BURDEN, S.R.N.
	MRS. A. O. CAMPBELL, S.R.N.
	MISS L. F. M. DUNNICLIFFE, S.R.N., S.C.M., Health Visitor's Certificate.
	MRS. E. ELLIS, S.R.N., S.C.M.
	MRS. E. A. GORE, S.R.N., S.C.M., Health Visitor's Certificate.
	MRS. E. M. HALE, S.R.N. (Temporary appointment).
	MRS. A. E. HALL, S.R.N., S.C.M.
	MISS A. B. SEERS, S.R.N. (Temporary appointment).
	MRS. L. WARDLE, S.R.N. (Temporary appointment).
	MRS. E. M. WICKENS, S.R.N., S.C.M.
	MRS. I. WILSON, S.R.N.
	MRS. G. L. YOUNG, S.R.N.
Chief Clerk ...	M. R. C. COURTOIS (Resigned October, 1949).
	E. A. MOORE (Appointed November, 1949).
Clerks ...	MISS E. STEPHEN (Senior).
	MISS P. ATKIN.
	MISS J. BRADBURY (Resigned August, 1949).
	MISS B. CLARK.
	MISS D. CLARKE.
	MISS E. ESSAM.
	MRS. K. FLETCHER.
	MRS. A. GARDNER.
	MISS N. B. GRIFFIN.
	MISS J. JONES.
	MRS. F. WOODCOCK.
Dental Attendants ...	MISS D. BARNES.
	MRS. A. CHURCH.
	MISS D. CLEAVER.
	MISS K. FARREN.
	MRS. P. SIMMS (Resigned September, 1949).

# CITY OF COVENTRY

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## SCHOOL HEALTH SERVICE 1949 ANNUAL REPORT

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To the Right Worshipful the Mayor, Aldermen and  
Councillors of the City of Coventry.

MR. MAYOR, LADIES AND GENTLEMEN,

*I have great pleasure in presenting my Annual Report upon the work of the School Health Service for the year 1949. It is now four years since the Education Act, 1944, became operative and as a result, the demands upon the service and the work entailed thereby continue to increase year by year.*

*It is now possible to view, retrospectively, the first full year's operation of the National Health Service Act, 1946 (which has been in force since July 5th, 1948), in its relation to the provisions of the Education Act. We anticipated, and it appears erroneously, that the former legislation would result in smaller demands being made upon the School Health Service by most parents on behalf of their children. We have seen, in point of fact, a steady growth in the numbers of children attending our specialist and minor ailments clinics. To meet the increased demand, it has been necessary to augment the number of specialist sessions; further medical sessions for minor ailments have also been established. It is pleasing to note that the close and beneficial liaison between the school medical personnel and that of the Regional Hospital Board continues.*

*Considering the limitation of suitable clinic accommodation throughout the City, the school children of Coventry are fortunate in having at their disposal quite a wide range of specialist sessions and other allied facilities. These are all held at the Central School Clinic for the time being and are as follows:—*

Heart and Rheumatic Clinic

Ear, Nose and Throat Clinic

Ophthalmic and Orthoptic Clinics

Chiropody

Speech Therapy

Physiotherapy—for selected cases of cerebral palsy and for which Miss Hyatt, Physiotherapist of Carlson House, Birmingham, is owed a debt of gratitude for her voluntary and generous assistance.

There is a waiting list for each of these specialist and auxiliary sessions, but, with the exception of the aural and visual conditions, the lists are under control. Because of the bed shortages, insufficient clinic space and personnel, and the increasing demand for specialist attention, the ear, nose and throat waiting list has now reached alarming proportions. It is the intention of the Local Education Authority to provide adequate specialist services for the essential requirements of a rapidly increasing school population, which, including an estimate of children attending private and independent schools, is now approximately 38,163.

With the anticipated addition of new clinic premises in 1950 at Stoke Heath School, the problem of relieving pressure at the overworked Central School Clinic will be partially solved besides providing a more convenient centre for the population in the Stoke Area.

The numbers of school children attending the branch clinics at Whoberley School, Windmill Road School and Binley School respectively, are growing steadily since the establishment of medical personnel was brought up to strength, and it is now possible to arrange more frequent routine sessions. Generally speaking, the premises in which these clinics are held are cramped and inadequate for modern requirements and credit is due to the medical and nursing staffs for carrying on efficiently under difficult conditions.

It is disheartening to find that we still cannot begin to think of routine dental inspections for school children or even dental sessions at outlying clinics as our dental staff is so depleted. No less than four dental officers resigned between July and October, 1949. This leaves the School Health Service with two dentists, (a senior and an assistant dental officer) to cope with our school population.

Three out of five of our assistant school medical officers have been approved by the Ministry of Education for the purposes of ascertainment of educationally subnormal and ineducable pupils and it will be most helpful if the remaining two can take the required course during 1950. A system whereby the future needs and requirements of ineducable children are discussed between the appropriate parents, School Health and Mental Health staffs (Health Department) respectively, has been introduced. An interview takes place before the statutory letter notifying the parents of the Local Authority's decision and intention has been sent. The results are very satisfactory and this procedure appears to be doing a great deal to improve the liaison between the people most concerned with the welfare of these children.

#### MEDICAL INSPECTIONS.

During the year 8,560 (10,428) children were medically examined under routine arrangements. This figure shows a decrease of just under 2,000 since 1948 but this can be explained by the shortage of medical staff which in October, 1949, was

increased by two additional assistant school medical officers: the outlook for 1950 is therefore somewhat brighter. It is noted that the number of special inspections and re-inspections showed an increase over that for 1948 (i.e. 1948—5,592; 1949—6,101).

#### GENERAL CONDITION OF PUPILS INSPECTED DURING 1949.

	No. of pupils inspected.	Good (A)	Fair (B)	Poor (C)
Entrants ... ..	3,657	1 506—41.2%	2,077 56.8%	74—2%
Second Age Group ...	1,742	747—42.9%	973—55.8%	22—1.3%
Third Age Group ...	1,209	536—44.3%	670—55.4%	3—.3%
Other Periodic Medical Inspections	1,952	877—44.9%	1,054—54%	21—1.1%
	<hr/> 8,560 <hr/>	<hr/> 3,666 42.8% <hr/>	<hr/> 4,774—55.8% <hr/>	<hr/> 120—1.4% <hr/>

There was again a steady increase in numbers in Category (A) during the past year. 42.8% of the children examined came in this category, compared with 1948 when 35.18% were classified as good. A decrease in numbers falling in the "Fair" category and a similar decrease from 5.7% to 1.4% of the "Poor" type since the end of 1948 occurred. This decline may be attributed to the fact that all the "Poor" type and certain of the "Fair" type children are followed up as far as possible until their condition is satisfactory.

#### CHILD GUIDANCE.

The total number of children referred to the Physician in Psychological Medicine at the Coventry and Warwickshire Hospital during 1949 was 127, an increase of seven on last year's numbers. Pending the inauguration of a Municipal Child Guidance Clinic in Coventry, this hospital department has proved invaluable. Plans have been approved and work is expected to commence on the new Child Guidance Clinic early in 1950 and it is confidently expected that this clinic should be functioning early in 1951. A report of the working of Child Guidance arrangements at the Coventry and Warwickshire Hospital under the supervision of Dr. Gillman, Physician in Psychological Medicine, appears elsewhere in this report.

#### CHIROPODY.

The above sessions were recommenced at the Central School Clinic on October 28th, following an interval of three weeks due to the resignation of the previous Chiropodist. There were 125 cases seen by the end of the year, making a total of 495; 21 children are awaiting appointments.

#### CONTAGIOUS DISEASES.

There has been a decrease in the incidence of all contagious diseases affecting school children in Coventry during the year. The most notable instance is that relating to ringworm of the scalp—four in 1949 as compared with 25 in 1948. This result can be



ascribed to the stringent follow-up of contacts in the schools with the Wood's Light method of diagnosis. The declining incidence of scabies is also worthy of note, 76 cases being treated in 1949 compared with 208 in the previous year. There were 210 cases of impetigo during the past year compared with 357 for 1948, a decrease of 147. The total number of school children found to be infested with pediculi in 1949 was 1,230 compared with 1,249 during the preceding year.

#### CORLEY OPEN AIR SCHOOL.

It is with renewed pleasure that I comment upon the progress achieved for children attending this school during 1949. Last year the satisfactory results of the treatment of enuresis amongst delicate children were noted and this year we have, in addition, the satisfaction of knowing that the combined efforts of the staff have been of great help in reducing the number of attacks for those children suffering from asthma. It has also been possible for many of the children to progress without recourse to the usual type of drugs. In spite of shortage of staff, the children have been encouraged to help themselves whenever possible. We are fortunate in having at Corley nurses who have been particularly interested in these children and they have been unsparing in their efforts to help their young charges.

The school now has a badminton court and the children also play cricket and inter-school football matches. The children benefited considerably from the long summer and the playroom has thereby not been required so often.

Due to force of circumstances, at one period during the year there were 102 children accommodated at Corley. This position eventuated because the school was in quarantine approximately 4 weeks as a result of mumps and as this reduced the admissions to nil, something had to be done to accommodate the children who had waited so long. One child contracted scarlet fever during the year and was removed to the Isolation Hospital.

Nurse Poole was still in residence by the end of the year as also was Nurse Rideout, the State Enrolled Nurse; Nurse Johnstone was with us for two months. I should like to express to these nurses my appreciation for their work during the year.

Miss Caborn and her teaching staff deserve much credit for their valuable work in the school. Theirs is much more than a teaching job; it is "parent" and teacher rolled into one. Their continued and willing co-operation with members of the School Health Department is much appreciated and this mutual and pleasing liaison is productive of beneficial results on behalf of the children.

Dr. M. M. R. Gaffney has supplied further detailed comments upon the work at Corley Open Air School during 1949: these appear elsewhere in the report.

## DENTAL SERVICE.

*It is with great regret that I have to report that four dentists out of six resigned from the Coventry School Dental Service during 1949: all to take up general practice. As a result, dental inspections in schools have had to be discontinued and, in fact, by the end of 1949, the Dental Service was only able to cope with emergency treatments. The branch clinic at Windmill Road had to be discontinued. When it is realised that in order to give adequate attention to the needs of expectant mothers, and pre-school children in addition about 12 full-time municipal dentists would be necessary, it may be possible to appreciate the extent to which this "priority" service has collapsed. It was reasonably anticipated that, with the provision of facilities for mothers and young children under the National Health Service Act, 1946, the demand for the municipal service would diminish: the contrary has, in fact, been the case.*

*I am pleased that Mr. Raeside, the Senior School Dental Officer, has brought this appalling position acutely to attention in his more detailed report which follows later.*

*During the year, 9,332 (13,788) children were inspected under routine age groups or as special cases and 11,020 (9,820) were found to have some dental defect. The number of children who received treatment was 8,188 (6,408) making 13,424 (13,438) treatment attendances.*

## DIPHTHERIA IMMUNISATION.

*There was, unfortunately, a decrease in the numbers of children immunised in Coventry during 1949 as compared with 1948. This was due to the shortage of assistant school medical officers during the year, which situation altered in October, when three new appointments were made.*

	1949	1948
Diphtheria Immunisation ... ..	918	1,093
"Booster" Dose (i.e. Reinforcing Dose)	1,619	1,810
Combined Diphtheria and Pertussis ...	59	9
Pertussis only ... ..	29	1

*There were two deaths from diphtheria in Coventry in 1949. It is apparent that neither parents nor those responsible for the health of school children can afford to be complacent about the rapid fall in the death rate from diphtheria of recent years, brought about by the immunisation campaign. The fact that we have always unrecognised "carriers" of the diphtheria bacillus in the community must be borne in mind, and, in order to keep our morbidity as well as our mortality rate down, immunisation must be continued at the same high level.*

## EAR, NOSE AND THROAT.

*Four (sometimes six) sessions per month were held by Mr. Kander and Mr. Ogilvy Reid for ear, nose and throat conditions. A total of 1,505 children were seen by the specialists at these*

sessions. Waiting lists are much too lengthy. Operative procedures, except for the most urgent cases, were suspended during a portion of the summer and early autumn periods. This ban was imposed as a necessary evil during the increased prevalence of acute poliomyelitis in the community. A specially trained nurse continues to carry out various treatments ordered by the aural specialists: these are undertaken at subsequent clinic sessions. The total number of operations performed during the year was 651 thereby showing an increase of 240 over those for 1948.

#### HANDICAPPED PUPILS.

The amount of accommodation for handicapped children at special schools within the city is still very inadequate. The list of children awaiting admission to suitable schools for educationally subnormal pupils is very disheartening to contemplate. During the year, there were 383 children ascertained as falling within the meaning of the Handicapped Pupils and School Health Service Regulations, 1945. It is, however, encouraging to note that, with the advance of medical knowledge and treatment, more of these children recover in sufficient time to enable them to attend ordinary schools. As an example of this I would draw attention to the now more roseate outlook for operable cases of congenital heart disease. Certain children affected by such cardiac conditions are enabled to lead more normal and active lives following radical operative procedures.

Cases of cerebral palsy also come within this category. The disbandment of the Birmingham "Spastic" Team was a great disappointment but it was unavoidable since two of its members had completed their research and taken up other appointments. Dr. Asher is now at the Children's Hospital, Birmingham, and Mrs. Schonell has left for Australia. Miss Hyatt is fortunately still with us and I am greatly indebted to her for the continued voluntary and selfless service which she has offered so freely in the interests of many of these unfortunate Coventry children.

A summary relating to the situation as it affects Coventry children suffering from cerebral palsy is given elsewhere in this report. A table dealing with statistical details of handicapped children is also appended.

#### HEART AND RHEUMATIC CLINIC.

This clinic is held weekly at the Central School Clinic, Gulson Road, under the direction of Dr. Parry Williams, Pædiatrician, Coventry and Warwickshire Hospital, and is for the benefit of heart and rheumatic cases only; a total of 451 cases were seen by the end of the year. Dr. Parry Williams comments later in the report on the work of the clinic. Four cases of congenital heart disease have received operative treatment and the resulting outlook for these children is much brighter and encouraging for all concerned.



There seems a slight increase in rheumatic conditions of children but this would appear to be due largely to an apparent increase resulting from earlier and fuller ascertainment of cases.

Children suffering from other complaints and needing a specialist opinion are sent by the assistant school medical officers to Dr. Parry Williams' Pædiatric Clinic at the Coventry and Warwickshire Hospital. School children having heart and rheumatic conditions which are seen by him in the out-patient department at the hospital, are subsequently referred to the appropriate sessions at the Central School Clinic for continued supervision.

It is again a pleasure for me to remark upon the cordial relationships which exist between Dr. Parry Williams and his staff and my own personnel. The benefit which this co-operative liaison has brought to the children of this City is very considerable and I would wish to thank Dr. Parry Williams for his greatly appreciated endeavours on their behalf.

#### MILK AND MEALS IN SCHOOLS.

There was an increase in the number of mid-day meals served to children at school canteens during the year: 15,100 compared with 12,344 in 1948. There was a slight increase in the demand for free milk. The actual figures supplied by Miss J. Hatfield appear later in this report.

#### ORTHOPAEDIC TREATMENT.

During 1949, there were 366 (544) children referred to Paybody Orthopaedic Clinic for diagnosis and treatment. The weekly list forwarded by the Secretary of the Paybody Clinic is greatly appreciated and is a means of ascertaining physically handicapped pupils more readily. The mutually co-operative arrangements existing in respect of this work and the satisfactory results achieved thereby for the children are a great source of satisfaction to all concerned. All uncomplicated postural defects and minor degrees of flat foot, etc., are referred to the Physical Training Organiser, and the required remedial exercises are carried out at the schools.

#### SCHOOL OCULIST DEPARTMENT.

The satisfactory work undertaken in this department continues under the specialist supervision of Mr. J. W. Bishop. More detailed reports upon the work carried out for school children are supplied by Mr. Bishop and the Senior Orthoptist in later pages. A total of 1,335 children were referred for the correction of errors of refraction during 1949; 193 children made 5,099 attendances for treatment at the Orthoptic Clinic. It is to be regretted that the waiting lists are still so formidable and credit is due to the staff for coping with a difficult situation. There is need for the services of an additional ophthalmic surgeon and further clinic space. When these become available the position should improve considerably.

## SECONDARY GRAMMAR SCHOOLS.

*With the appointment of two full-time assistant school medical officers, routine examination and re-examination in these schools is expected to recommence in 1950.*

## SPASTICS.

*During the year, much attention was focussed upon the problem which these children presented both from an educational and medical point of view. Plans are being made for the conversion of hostel premises to provide a suitable day school for physically handicapped children. It is hoped that these facilities will be available during the course of the coming year, and the premises, when completed, will include a self-contained unit for the education and treatment of cerebral palsied children.*

*A further few of these children who were considered as being suitable for deriving benefit from home tuition, were afforded this facility and satisfactory progress was noted in their attainments by the end of the year. A comment is supplied by the Senior Assistant School Medical Officer later in this report.*

## SPECIAL SCHOOL FOR EDUCATIONALLY SUB-NORMAL PUPILS.

*As will be seen in the report supplied by Mr. Grice, Headmaster of the Grove Day Special School, the waiting list for admission to this school gives cause for some concern. Since it is most desirable for these children to be admitted as soon as possible after ascertainment and as early in their school life as will ensure their deriving maximum benefit from the special education. It becomes obvious that the longer they wait, the less favourable the outcome when they reach school leaving age. In the past, it has been noted that a few children of very low intelligence have been notified to the School Health Department between the ages of 12 and 15. This is far too late for constructive action to be taken under present circumstances, having regard to the inadequate special school accommodation existing. It is to be hoped with additional medical personnel and close liaison with the head teachers that this situation will not be allowed to recur.*

*The work carried out by Mr. Grice and his staff during the past year is worthy of the best thanks of parents and all those who are vitally concerned with the welfare and future of these handicapped children.*

## SPEECH THERAPY.

*There has been an increase in the work of this department during the year, 73 new cases being seen. It is hoped that the services of an additional full-time speech therapist will help to shorten the waiting list. Miss Carr's work particularly with the cerebral palsy cases, is of much value and is greatly appreciated.*

### WYRE FARM CAMP SCHOOL.

The health of the children at this school during 1949 was particularly gratifying; there were no outbreaks of infectious diseases. The continued dry weather during the summer months ensured these boys longer hours in the sunshine and open air and they undoubtedly derived benefit thereby.

The school was open for four weeks during the summer holidays to enable selected Coventry children and their teachers to avail themselves of a holiday in the open air: the results show that this was a happy innovation.

Dr. J. S. Jerome supplies more details on the activities, incidents and health situation at Wyre Farm Camp School during the year, later in this report.

### STAFF.

There were several changes in the composition of the medical staff during 1949. With the resignation of Dr. W. C. Collins, Assistant School Medical Officer, in May, to take up a position as Deputy Medical Officer of Health, Burton-on-Trent, and Dr. C. G. Woolgrove, Senior Assistant School Medical Officer, in August, to take up a post with the Birmingham Regional Hospital Board, the School Health Service was considerably depleted on the medical side. Dr. D. Jones, who was appointed Assistant School Medical Officer in June, 1948, left the service temporarily on May 31st, 1949, having been granted a year's leave of absence by the Authority in order to enable her to fulfil the conditions of the Kelmsley Travelling Fellowship awarded to her by the University of Leeds. She is undertaking a tour and survey in South Africa. Dr. M. M. R. Gaffney was appointed Senior Assistant School Medical Officer in September: Dr. M. S. Martin took up duty with the Authority on 19th September and Dr. A. C. Ross commenced on 1st October as Assistant School Medical Officers. In an effort to catch up with the work which was in arrears by the middle of 1949, it was necessary to retain the services of Dr. J. M. Wilson in a part-time capacity until December 31st.

Messrs. R. B. Vanse, K. J. Timms, S. F. Polley and E. K. Breakspear all resigned from their posts as Assistant School Dental Officers between July and October, 1949, to take up work in general dental practice.

Close and co-operative liaison with the Health Department has continued fruitfully throughout the year. There is little doubt in my mind that the importance of offering the widest possible range of duties and interests to intending medical and nursing staffs within the scope of the Municipal Medical Services will become more apparent as time goes on, and the duties within the Maternity and Child Welfare and School Health Services are intermingled. Such a measure, besides being more economical, would prove more attractive to applicants for these posts and

provide the Local Authority with the added advantage of being able to allocate staff to those duties, which, at any time and place, may be required most urgently.

One appreciates, in the case of nurses, that force of circumstances may for some little time, be such as to preclude this concept other than on a longer term basis in view of the limited numbers of nurses available with Health Visitor's qualifications. It must be admitted, however, that dual qualifications of Health Visitor and School Nurse, besides opening up wider spheres of interest to the staff concerned, would have greater advantages for **all** children throughout their pre- and inter-school lives.

It is quite definite that medical staff would be attracted more readily to the municipal service if they were assured of a wider range of experience than the present arrangements allow.

Mr. H. S. Kander and Mr. Ogilvy Reid have continued with their valued services for children suffering from ear, nose and throat defects during the year: likewise I am greatly indebted to Dr. Parry Williams for his work as pædiatrician and adviser in the Heart and Rheumatic Clinic and other spheres of the School Health Service. To Mr. J. W. Bishop also, my sincere thanks are due for his work as consultant at the Eye Clinic.

I would wish to take this opportunity to express my thanks to the Director of Education and his administrative staff, for their greatly appreciated helpfulness and likewise to the head teachers and their staffs for their similar assistance and co-operation throughout the year.

To all municipal staff associated with the School Health Service whether medical, dental, nursing or clerical, I would proffer my grateful appreciation for their diligent and efficient work during 1949. I readily acknowledge, too, the helpful assistance which I have at all times received in various administrative spheres from the Senior Assistant School Medical Officer (Dr. Woolgrove—now with the Birmingham Regional Hospital Board—and Dr. Gaffney), from the Senior School Dentist (Mr. Raeside), from the Senior School Nurse (Mrs. Mackie), and from the two Chief Clerks (Mr. M. R. C. Courtois—now a member of the Health Department, and Mr. E. A. Moore, respectively). I much appreciate the helpful assistance rendered by Dr. Gaffney and Mr. Moore in the collation of this Report.

In conclusion I would wish to express my thanks to the Chairman and members of the Special Services Sub-Committee for their helpful encouragement to my staff and self in the work of the department throughout the year.

I am,

Your obedient servant,

T. M. CLAYTON,

School Medical Officer.



## School Population, Accommodation, Attendances.

At December, 1949, there were 70 Primary and Secondary Schools (including Wyre Farm Camp School) under the control of the Local Education Authority, viz :—

- 49 Primary and all age schools with 62 departments.
- 14 Secondary Modern Schools with 17 departments.
- 7 Secondary Selective Schools.

The Primary and Secondary Schools are divided as follows :—

- 52 County Schools with 68 departments.
- 12 Voluntary C.E. Schools with 12 departments.
- 6 Voluntary R.C. Schools with 6 departments.

Number of children on registers, January, 1949	...	33,277
Number of children on registers, December, 1949	...	35,465
Average percentage attendance	... ..	90.9
Estimated number of children attending Independent and Private Schools	... ..	2,698
Estimated total population of the City of Coventry	...	254,900

## Child Guidance Arrangements.

Dr. S. W. Gillman reports as follows :—

“ During 1949 the same child guidance arrangements have continued under difficulties, that is at the Coventry and Warwickshire Hospital, where there is no adequate accommodation.

It would be of great value if the building of the Child Guidance Centre could be accelerated.

The total number of children seen is as follows :—

(a) New cases	... ..	127
(b) For treatment	... ..	388
Total		515

From these figures it can be seen that more treatment has been undertaken in this year than in the previous year.

Types of cases :—

(a) Behaviour disorders (including delinquency)	...	32
(b) Nervous and mental disorders	... ..	44
(c) Bedwetters	... ..	8
(d) Very dull and backward and mentally deficient	...	28
(e) Various	... ..	15
		127

The cases were mainly referred by the School Medical Officers, but others have been sent from the family Doctors, Probation Officers, the Children's Officer and Social Workers.

It is my opinion that many more children should be seen, but the numbers at present have almost reached saturation point for my clinic which is run in association with the Adult clinic.

I was able to continue with the full team of Psychiatrists, Psychological and Psychiatric Social Workers.

I would like to place on record my thanks for the co-operation from Dr. Clayton and his medical and lay staff during the year 1949.”

## Chiropody.

Report of Mr. A. T. E. Freke, School Chiropodist :—

“ I have the honour to submit to you the following report of the work at the Chiropody Clinic at Gulson Road.

Chiropody clinics were commenced again on October 28th, 1949, at the Central School Clinic.

At present four three-hourly sessions are held per month.

Children are referred for treatment by the School Medical Officers, from the Orthopædic Clinic, or at their parents' own request.

The average attendance per session has been twelve, and up to the end of the year ninety-six attendances were made.

The demand for this treatment has, as anticipated, increased enormously, and there is now a waiting list of some fifty patients.

The majority of cases seen were verruca, necessitating weekly treatment. Cases of weak feet were treated with the aid of corrective padding and were referred for exercise. A number of acquired deformities were seen and are responding well to conservative treatment.

Three patients were referred to Paybody Orthopædic Clinic.

It has been noticed that a very large percentage of the children presenting themselves for treatment are wearing shoes that are too short for them, or shoes which have been passed down from their elder brother or sister.

This is considered to be rather a serious problem, as a large percentage of the minor deformities are produced by the wearing of ill-fitting footwear.

I have only been attending the Clinic for two months; there is little else to report, but there is indication that there will be a considerable increase in the application for treatment in 1950.”

## Corley Open Air School.

Dr. Gaffney reports :—

“ The good work which Corley Open-Air School has been doing for the benefit of the delicate children of Coventry, continued apace during 1949. The report on the progress of this school is a pleasant one, including as it does such evidence of achievement.

It can be truly said that the staff of a residential open-air school, in addition to doing such good work, are also following a definite vocation: self comes last here, and it cannot but be felt that a period in such work must bring out the best in any individual. The teaching staff have continued to give excellent service and have been instrumental in changing many a delicate child's attitude towards education. So many of these children have been too tired or too ill previous to admission to be interested enough in their lessons to make progress and so have suffered from a sense of inadequacy in comparison with their more healthy fellows.

The children continue to attend the various specialist sessions at the hospitals and clinics, and they quite look forward to these visits. I may say here that those of us who deal with these children are very appreciative of the special consideration and care that is given to the Corley children at these sessions. As a result, a number of them have acquired a changed attitude towards doctors and nurses and medical procedure in general.

Among the special clinics attended by these children in 1949 were :—  
*At the Coventry and Warwickshire Hospital.*

Pædiatric clinics	...	...	...	...	} 325 children attended
Ear, Nose and Throat clinics	...	...	...	...	
Skin ailments clinic	...	...	...	...	
Special breathing exercises	...	...	...	...	

*At the Central School Clinic, Gulson Road.*

Heart and rheumatic session	...	...	...	...	} 243 children attended
Speech therapy clinic	...	...	...	...	
Ophthalmic clinic	...	...	...	...	
Chiropodist clinic	...	...	...	...	
Orthoptic sessions	...	...	...	...	

*At Paybody Orthopædic Clinic.*

Orthopædic clinics	...	...	...	...	} 319 children attended
Special exercise clinics	...	...	...	...	

Certain children who had been contacts of tuberculosis cases attended the Quadrant Health Clinic at regular intervals—a total of 44 such children were seen.

A few children attended the Child Guidance Unit at the Coventry and Warwickshire Hospital when it was found that their emotional problems were responsible in part for their poor physical condition.

Twenty-six children had tonsils and adenoids operations.

Six children went to Switzerland under the Red Cross scheme for pre-tubercular children and the results were very satisfactory.

The isolation block has not been much in use during the past year, except in the early months, when a mild outbreak of mumps and a few cases of infectious hepatitis occurred.

The provision of a badminton and tennis court, and facilities for cricket and table tennis have been found most useful in encouraging the more timid children to learn to play these games well, thus helping them to get rid of the inferiority complex a number of them had in connection with outdoor games on admission.

The most noticeable success at Corley has been in the treatment of asthma cases. Attacks become more infrequent as time goes on, and, with co-operation of the teaching and nursing staff, these children are being taught relaxation and a proper attitude towards their handicap. As a result, drugs are not so much used as they were in these cases, and the children who were dependent on such measures previously are able to do without them for increasingly long periods.

Miss Caborn may well be proud of the result of her organisation and her efforts on behalf of these children, and I would like to express my appreciation of her co-operation at all times and that of her staff; also, the nursing staff both indoor and outdoor deserve special mention for their unselfish work at Corley—due to shortage of personnel they have worked considerable overtime periods and have frequently forfeited their off-duty and night's sleep without complaint."

## Dental Treatment.

The report of Mr. Raeside, the Senior School Dentist :—

" Since 1920 it has been my duty and privilege to submit annually a report on the work carried out by the School Dental Staff.

During all these years it has afforded me great satisfaction to be able to record, from time to time, the steady growth of the service, and it has been my ambition to see established a complete clinic system covering the whole of the City. A branch clinic at Windmill Road was opened in November, 1948, and arrangements were being made to provide similar dental facilities in various outlying districts of the City.

The future seemed full of promise, and I was particularly fortunate in having at the time five most capable and conscientious assistants who were all anxious to make the service a success. Such was the outlook in 1948. Now, after only 18 months' operation of the National Health Scheme, the School Service has degenerated into nothing more than a "breakdown service", carrying out, in the main, emergency treatment only.

Four dental officers (Messrs. Vause, Timms, Breakspear and Polley) resigned during the year to enter private practice, leaving only two dentists to attend to the needs of approximately 36,000 school-children. This reveals a situation which can only be described as appalling, and there does not appear to be any immediate solution to the problem until the whole scheme is reviewed and entirely re-organised.

Whilst the great increase in patients seeking dental treatment from private practitioners suggests that some form of National Health Scheme was long overdue, it is extremely regrettable that the drift of dental surgeons from the School Service to private practice was not foreseen.

The very depleted School Service cannot possibly cope with the ever-increasing demand for treatment, with the result that the teeth of the children are being sadly neglected. It is difficult to understand why adequate provision has not been made for the priority treatment of school children, pre-school children and expectant mothers.

With regard to expectant mothers, it should be noted that emergency treatment of these cases is still being carried out by the School Dental Service. This, in my opinion, with the present depleted staff, is not justified, and it would be infinitely better to concentrate at the moment, entirely on the treatment of *pre-school children and school children*.

At the beginning of the year an inspection of the Coventry Dental Scheme was carried out by one of the Medical Officers (Dr. A. T. Wynne) of the Ministry of Education. I was pleased to welcome Dr. Wynne, as apart from a general review of the whole work carried out at the clinic, an opportunity was afforded to discuss the future policy. However, in the light of recent events, it is to be regretted that it has not been possible to carry out some of the suggestions put forward. In fact, as already mentioned, owing to the complete breakdown of the service drastic changes had to be made. School inspection of children had to be abandoned in July, as it is now only possible to attend to the most urgent applications for treatment received from parents. These applications from various sources have now reached a fantastic figure, including a high percentage from parents of children, who, in the past, had not availed themselves of the services of the Clinic, but had preferred to have treatment from a private dentist. They now find that they are no longer able to obtain treatment from these sources and are being encouraged to apply to the Clinic.

The Orthodontic Scheme, started in 1947, has also been discontinued as it is not possible to give the necessary time to this class of work. During the year 236 sessions were devoted to orthodontic treatment and 168 appliances fitted. Maternity and Child Welfare sessions numbered 206 and 145 artificial dentures were supplied to expectant and nursing mothers.

Full details of the various forms of treatment carried out during the year are given in the accompanying table.

The immediate future presents many difficulties to be overcome, but it is to be hoped that a satisfactory solution will be found so that the School Dental Service can be rebuilt on a much stronger foundation, and attract suitable officers to carry out work of most vital importance to the State."



### Dental Treatment, 1949

			Primary and Secondary	Infant Welfare	Ante- Natal	Totals
Fillings—Permanent	..	..	2,595	—	132	2,727
Fillings—Temporary	..	..	642	100	—	742
Extractions—Permanent	..	..	2,209	—	1,598	3,807
Extractions—Temporary	..	..	11,108	682	3	11,793
Other Operations	..	..	1,979	11	421	2,411
Administration of general anesthetics for extraction	..	..	1,494	221	246	1,961
Attendances	..	..	13,424	673	1,306	15,403

### Diphtheria Immunisation.

The Senior Assistant School Medical Officer, in her report to me concerning the 1949 position relating to immunisation against diphtheria amongst the school population states:—

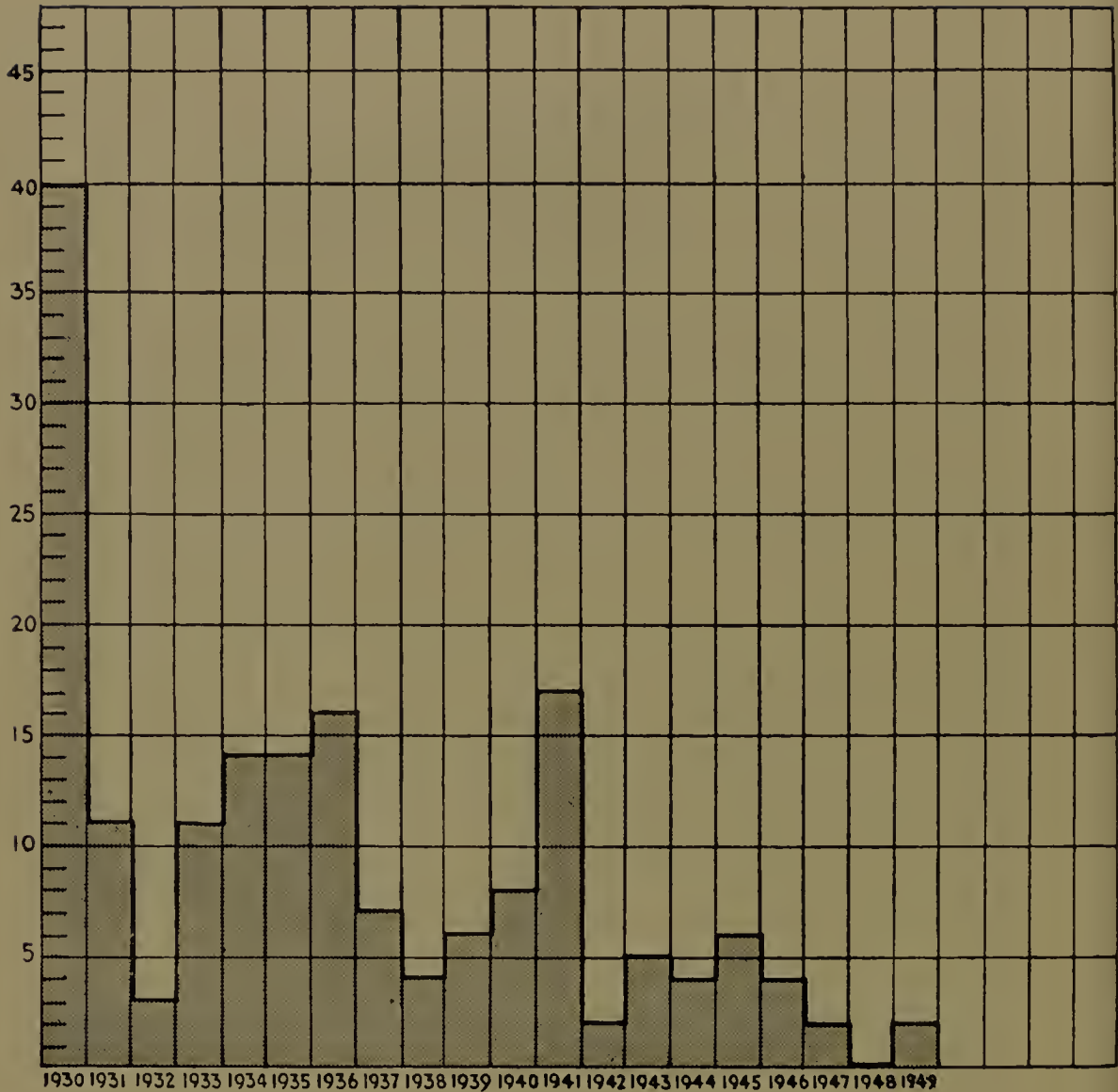
“ Last year it was a pleasure to be able to report that there had been no deaths from diphtheria in Coventry. In 1949, though the same number of cases (12) occurred, there were two deaths. Reference is made in the introduction to this report on the significance of this.

It will be realised from the following tables that immunisation against diphtheria is a measure in preventative medicine that we cannot afford to neglect.”

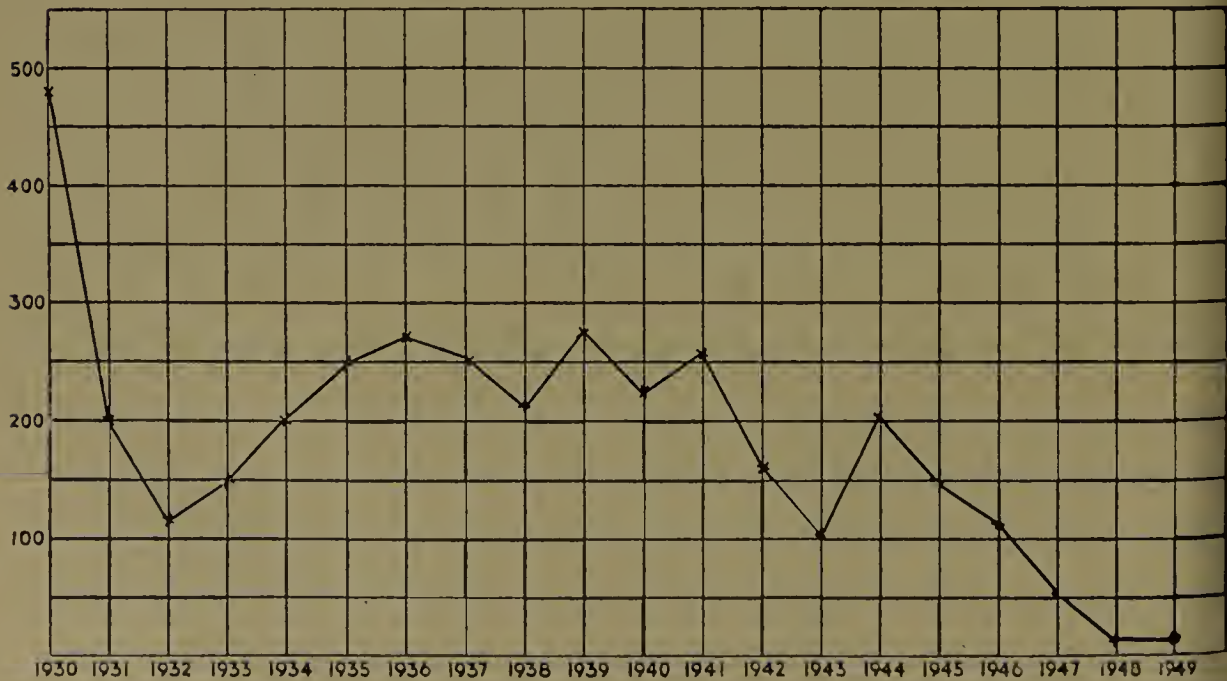
TABLE.

1945	...	...	146 cases	5 deaths of which none was immunised.
1946	...	...	115 „	4 „ „ „ „ „ „
1947	...	...	53 „	2 „ „ „ „ „ „
1948	...	...	12 „	NIL
1949	...	...	12 „	2 „ „ „ „ „ „

DIPHThERIA DEATHS IN COVENTRY 1930-1949.



DIPHThERIA CASES IN COVENTRY 1930-1949.



## **Ear, Nose and Throat Clinic.**

The Ear, Nose and Throat Clinics were commenced in June, 1948, at the Central School Clinic, and, therefore, this is the first complete report covering the whole year. At first three clinics per month were held, but it soon became clear that this was not sufficient; and during the year five sessions and, when possible, six sessions were held per month.

Children referred by the School Medical Officer or private doctor were seen and treated, and cases in which operation for tonsils and adenoids have been advised were reviewed by the specialists. It is interesting to note that 1,686 children are awaiting appointments with the specialists; of these 350 are classified as urgent.

In addition to this large group, patients with discharging ears, deafness, and sinus disease are being treated either at the Clinic or by operation in the Coventry Hospitals.

It is pleasing to note that full liaison and co-operation still exists with the X-ray Department and with the Deaf Clinic at the Coventry Hospital. Deaf children are referred to the Audiometrician and special Audiometric tests are given. Some children have also been referred to the Radiotherapy Department of the Coventry Hospital where certain cases of deafness have been treated with very satisfactory results.

Unfortunately the position as regards the operative treatment in connection with tonsils and adenoids is still very unsatisfactory. The waiting list does not appear to get any smaller, and the period of waiting is far too long. It is hoped, however, that the bed and nursing position will improve so that the waiting list can be reduced to more reasonable proportions.

## **E.N.T. Sessions.**

Mr. Ogilvy Reid, the Joint Consultant, reports:—

“ I am still very satisfied with the working of the Ear, Nose and Throat Clinic at the Gulson Road Centre, and my only regret is that I can still only manage to attend once a month. In the intervals, sister carries out treatment on aural cases which I advise, and her keenness and that of the staff generally is much appreciated. Special cases also attend my out-patient clinics at the Coventry and Warwickshire Hospital for my personal supervision, and I regard this co-operation between the Central School Clinic and the Hospital Service as most valuable.

Another improvement in this direction is the system now in operation of putting cases recommended for operation directly on to my waiting list at the Hospital, as in this way I can ensure that urgent cases get the priority they merit. I am also thus able to take steps to see that selected patients are actually operated on by myself when I deem that advisable.”

## **Heart and Rheumatic Clinic.**

Dr. H. Parry Williams, the consultant pædiatrician, reports :

“ During the past year 114 new cases have been seen and 337 old cases have been re-examined. It is hoped to give fuller details of these cases, and percentages of innocent murmurs, in a further report later.

Since the date of the last report two children with co-arctation of the aorta have been operated on with good results, and two cases of Fallot's tetralogy, also with good results.

The incidence of acute rheumatism seems to be increasing, and now that Bramcote Hospital is being devoted to the care of long-term illness in children, both acute rheumatism and chorea can be adequately dealt with.

Many children have been seen with cardiac murmurs which have been innocent, and a follow up of these children has, in the great majority of cases, supported the original diagnosis.

It is hoped in the near future, with the co-operation of Mr. Leigh Collis and Dr. McGregor, of Warwick, to start cardiac catheterization, an investigation which it is imperative to undertake for complete evaluation of congenital heart lesions. Up till now we have been dependent on the Queen Elizabeth's Hospital, Birmingham, for this.

It is a pleasure to place on record the continued co-operation and help of Dr. Clayton and his staff."

## Milk and Meals in Schools during 1949.

Report of Miss J. Hatfield :—

" 2,798,987 meals (2,493,390 children and 305,597 adults) were served during 1949. The daily average rose from 13,800 to 15,100 during the course of the year.

*Five new kitchens were opened as follows :—*

Barr's Hill School Canteen	...	...	February
Keresley Grange School Canteen	...	...	September
Whoberley Hall Central Kitchen	...	...	September
Charter Avenue Central Kitchen	...	...	September
Longford Park School Canteen	...	...	November

Under the Milk in Schools Scheme, all children attending full-time education at L.E.A. schools are entitled to one-third pint bottle of milk per school day, if they so desire. According to statistics called for by the Ministry of Education on two specific dates during 1949, the percentage of children in attendance at school and receiving free milk was 91.9 per cent. in February and 89.6 per cent. in October.

The actual figures were :—

*February—*

No. of children at school	...	...	...	...	29,691
No. of children receiving free milk	...	...	...	...	27,299

*October—*

No. of children at school	...	...	...	...	33,000
No. of children receiving free milk	...	...	...	...	29,584."

## School Oculist.

Mr. Bishop, the School Oculist, reports :—

" Since my report for the year 1948 there has been very little change in the position with regard to the work in the School Eye Clinic. Unfortunately there is still considerable delay with regard to all aspects of the work. Except for urgent cases the waiting time for refraction is approximately four months and the waiting time for a child requiring operation for strabismus is six to nine months. However, there has been a slight improvement in the position with regard to spectacles, and though in the case of difficult lenses the wait is still very prolonged, it is, in some cases, possible for the child to obtain the spectacles when they have been ordered in a matter of three or four weeks. The average case, however, still takes considerably longer than this.

As in so many departments these days the accommodation is very limited and, as a result, everybody is working under difficulties which, to some extent, reduces the amount of work that can be done in the Clinic. However, in spite of these difficulties, the nursing staff have co-operated excellently in the running of the department, and I would like to express my thanks to them.



The orthoptic work in the Clinic has slowly increased its scope and the number of cases handled during 1940 (total number of treatments 5,089) is a tribute to the hard work put in by the two full-time orthoptists."

### Orthoptic Treatment.

Miss M. M. Venner, the Orthoptist in Charge, reports as follows :—

" During the year 1940 there were 67 cases cured (*i.e.*, having single binocular vision) and 4 cases were discharged as orthoptically satisfactory as their tests were not quite up to a standard of cure. Of these 67 cures, 18 received surgical treatment.

29 further cases were discharged as cosmetically satisfactory (*i.e.*, appearance good and symptom free). Although these cases were operated on, they did not respond to orthoptic treatment sufficiently to gain single binocular vision.

65 operations were performed last year, and the waiting list to date stands at 60.

At the moment there are 19 cases awaiting weekly synoptophore treatment, 58 cases receiving occlusion and 66 cases are deferred—awaiting glasses, or are " on trial " pending discharge.

42 cases ceased to attend, although all were written to and sent a further appointment. 11 cases were refused, the parents of 4 of these refused operation, consequently making further treatment useless.

By December 31st, 193 new cases were registered during the year."

### Orthopædic Arrangements.

The Coventry Paybody Orthopædic Clinic has continued with its good work for children having orthopædic defects. Cases are referred to the Paybody Clinic by the school doctors. These cases are found at the routine medical inspection at schools and as a result of parents requesting appointments at the School Clinic. A total of 366 out-patients orthopædic defects were seen by the Orthopædic Surgeon at the Paybody Clinic, Holyhead Road, the necessary treatment being provided, such as remedial exercises under supervision, massage, physio-therapy treatment, and surgical appliances. Suitable cases were also referred for operation. A detailed table of the defects found on examination is included. A detailed week-by-week list and report is supplied to the School Medical Officer by the Paybody Clinic on all School children, who have attended for orthopædic defects. This list is of considerable help in the ascertainment of new cases of physical handicap which are likely to require special educational treatment.

TABLE OF DEFECTS NOTED AT THE PAYBODY ORTHOPÆDIC CLINIC

<i>Defects.</i>	<i>Boys.</i>	<i>Girls.</i>	<i>Total.</i>
Hallux Valgus ... ..	2	11	13
Congenital Dislocation Pattellæ ...	1	—	1
Calcaneo Valgus ... ..	3	—	3
Schlatter's Disease ... ..	—	1	1
Osteochondritis ... ..	—	1	1
Pes Cavus ... ..	1	—	1
Calcaneo Tuberositas ... ..	1	3	4
Claw Foot ... ..	6	4	10
Genu Valgum ... ..	19	11	30
Hallux Rigidus ... ..	2	3	5
Hammer Toe ... ..	1	5	6
Hemiplegia ... ..	1	—	1
Metatarsus Varus ... ..	1	—	1
Osteomyelitis ... ..	—	2	2
Bad Posture ... ..	11	6	17
Kyphosis ... ..	1	—	1
Pes Planus ... ..	43	35	78
Lordosis ... ..	—	4	4
Scoliosis ... ..	1	4	5
Spastic Monoplegia ... ..	—	1	1
Torticollis ... ..	1	3	4
Valgoid Ankles ... ..	6	3	9
Valgoid Feet ... ..	1	1	2
Valgoid Heels ... ..	7	8	15
Miscellaneous ... ..	29	26	55
Totals ...	138	132	270

### Physical Training.

The following is the report of the Organisers of Physical Training (Mrs. G. W. Grant and Mr. J. F. McCarthy), viz :—

“ The year 1949 has provided much evidence that, with the modern trend in Physical Education, teachers require more and more opportunities for taking part in courses dealing with the part Physical Education plays in the scheme of Education in general. So far as the Primary School Teacher is concerned this need is most pressing, and towards the end of the year demonstrations of typical work with Primary Classes were given to Head Teachers and Class Teachers, and these demonstrations were followed up by courses of further training for men and women teachers in Primary Schools. We have every reason to feel confident that the teachers who attended the courses will find much satisfaction in conducting their work on the lines indicated to them during the twelve sessions for which the course met. The keenness of teachers to attend and take advantage of this type of course is most encouraging, and we should like to pay tribute to those Head Teachers who, at some inconvenience, release teachers during school hours to attend these Courses.

Physical Education in the Secondary School is presenting to teachers a problem which can only be solved by the provision of adequate facilities for all types of games and activities which will have a carry-over value into post-school years. The scope of training and practice is being broadened and the opportunities for practice are being increased, but there is a great deal to be done in this respect in order to reach the standard merited by the enthusiasm and ability of those teachers concerned with Physical Education. However, progress is being made, and each year we are able to report increases in the acreage of playing fields controlled by the Education Authority. In spite of these increases the schools continue to be heavily dependent on the Parks Department for the provision of pitches and courts for Organised Games. In this

connection we feel indebted to the Parks Superintendent and his staff for the generous measure in which our requests are met and for their continued co-operation.

Throughout the year there has been a considerable increase in the demands from schools for opportunities to send classes of children for instruction in swimming, and we are now able to report that almost all schools send some classes at some time during the year. But this has only been possible as a result of increased special transport provision with a consequent increase in the cost of this service. Unfortunately there is still only one indoor swimming bath in Coventry which provides the only opportunities for instruction during the winter months. So long as this position continues we shall never be able to cater for the needs of schoolchildren so far as swimming instruction is concerned, and we can only look forward to increasing transport costs to provide buses to take classes to this solitary swimming bath. We are conscious that the present arrangements would be quite unworkable without the considerable assistance always given to us by the Baths Superintendent. In all matters concerned with swimming we are given every help, and we are grateful for the willing consideration which is given by him and his staff to our many proposals.

As in previous years, a Play Leadership Scheme was arranged to take place during the Schools Midsummer Holiday. Seven centres were opened and Leaders (Men and Women) were appointed to supervise and organise the activities. At one centre provision was made for Junior and Infant children only, and this experiment was immediately successful: the young children attending regularly and in large numbers, enjoyed immensely using the special games and play apparatus provided for them. The scheme as a whole was very successful and justifies fully the continuation and possible extensions of the arrangements.

In concluding this report we would like to mention a disturbing increase, notified to us by the School Medical Officer, of the number of cases of Flat Feet being found in the schools. Fortunately the increase was temporary only, and the cases notified were supplied with lists of suitable exercises to be performed, and in some schools these were carried out under the supervision of teachers before being continued at home. We would, however, like to see classes formed, where necessary, for the purpose of remedial exercise under expert supervision and guidance. We hope it may be possible to report later that some arrangement of this type has been made. The present measure of co-operating with the School Medical Department encourages us to make this suggestion with a high hope for some positive action, possibly during the year ahead."

### Secondary Grammar Schools.

The following number of medical examinations in respect of new entrants were conducted during the year:—

Barrs Hill School	...	...	...	...	85
Commercial High School	...	...	...	...	87
John Gulson School	...	...	...	...	90
Junior Art School	...	...	...	...	30
Priory High School	...	...	...	...	88
Stoke Park School	...	...	...	...	86
Technical Secondary School	...	...	...	...	83

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540

Again during 1949 only the entrants and leavers were examined owing to the shortage of Medical Staff. However, it is hoped that with the addition of two full time Assistant School Medical Officers the routine examinations at the Schools will recommence shortly.

### **Bablake School.**

I am much indebted to Dr. H. N. Gregg, Medical Officer at the above school, for the following interesting report :—

“ The health of the school has continued to be very satisfactory and I understand that attendances have been well up to the high level which has come to be expected at Bablake, with the exception of a short period of a week or so in February last. At this time there was a widespread incidence of streptococcal throat infections in Coventry and a number of boys, especially in one particular form, were affected and were away from school for a few days. Good classroom ventilation is an important factor in limiting the spread of such infections.

For some weeks there were a number of cases of boys fainting during morning prayers; I ventured to offer some advice about this in an article in *The Wheatleyan*. I understand that faints are now less common, though I hesitate to claim full credit for this.

Routine medical examinations have proceeded smoothly on the same lines as in previous years, and the great majority of the boys are found to be sound in wind and limb. The most common defects found are, still, dental caries and flat feet. I am glad to report this year, however, that there has been some improvement in dental health and that there have been fewer cases of boys coming up for re-examination with previously reported dental defects still untreated.

I have had under observation an interesting series of boys suffering from undescended or mal-descended *testes*; this, of course, is a developmental failure which usually only comes to notice at puberty, and is, therefore, not found out before the boy comes to Bablake, while the parents seldom seem to be aware of the trouble and, therefore, do not seek the advice of the family doctor. It has been gratifying to see that a considerable number of these boys have now been successfully treated either by operation or by hormone injections and a potential threat to their future well-being has been removed. Such cases, I feel, fully justify the School policy of regular annual medical examination for every boy in the school, and many parents who have attended with their sons have expressed their appreciation of this.”

### **The Physically Handicapped Child with Special Reference to Cerebral Palsies (“Spastics”).**

Dr. Gaffney, Senior Assistant School Medical Officer, comments as follows :—

“ It is noted that the Birmingham team (for research into the effects of cerebral palsy) completed its research in July, 1949. Consequently no child suffering from this combination of defects has been examined by the team since then.

It is hoped, however, that new arrangements can be made for the complete examination of these cases with regard to their physical and educational needs. At the moment we have a waiting list of twelve requiring examination by a suitable team.

Miss Hyatt, M.C.S.T., Physiotherapist for the Midland Spastic Association, visited Coventry at regular intervals during the year and there have been eight new cases and 86 attendances.

It will be recalled that the services of Miss Hyatt were offered quite voluntarily, and warm thanks are due for the excellence of her work and co-operation throughout the year.

A few selected cases are receiving home tuition, and the results by the end of 1949 are already promising. We have a very active branch of the parents' circle—Midland Spastic Association—in Coventry, and they have left no stone unturned to bring the plight of these children, who may have been overlooked in the past, to the notice of the appropriate authority.



It is now realised that the danger of such children being dealt with prematurely, under Section 57 (3) of the Education Act, 1944, is past. It is becoming increasingly apparent that the educational progress of the more handicapped of these children cannot be measured by weeks or months, but by years. It is amazing what an active brain dwells behind the slow, difficult, jerky speech and awkward inco-ordinate movements of some of these children, and it is surprising what a sense of humour they are found to possess if one has the patience to try and try again."

## THE GROVE SCHOOL

### (For Educationally Sub-Normal Children).

The Headmaster reports as follows :—

	<i>Total.</i>	<i>Boys.</i>	<i>Girls.</i>
No. on Register 31st December, 1948 ...	88	47	41
No. admitted during 1949 ... ..	28	14	14
No. allowed to leave for work at 16 ...	10	7	3
Transferred to Approved School ...	1	1	—
Transferred to Residential School ...	4	1	3
Returned to Normal Schools ... ..	3	1	2
Excluded as Ineducable ... ..	6	3	3
No. on Register 31st December, 1949 ...	92	48	44

#### 1. Appointment of School Governors.

At the Special Services Sub-Committee meeting held on the 20th January, 1949, Governors were appointed for the School, and the first meeting of the same was held at the School on 1st March, 1949. I should like to pay tribute to their interest in the welfare of the School, and to their vigour in putting into operation the following improvements :—

- (a) Re-decorating of the school in bright colours.
- (b) Provision of a sink in each classroom.
- (c) Provision of screen to divide large room into two classrooms.
- (d) Provision of curtain for the stage.
- (e) Replacement of old and too-small desks.
- (f) Renaming the school to " The Grove " in order to kill the attitude of the general public in regarding the school as the ' Daft ' or ' Silly ' School.
- (g) Provision of woodwork and gardening facilities at Binley School for the boys of this school.

#### 2. Organisation.

The re-organisation of the school on individual lines has been extended to practical subjects. The aim is to get each child to work independently and confidently from simple work cards, and these have been introduced for Domestic Science, Needlework, Woodwork, Gardening and other Crafts with a marked success. Our motto is ' the child is the starting point, the centre and the end ', and the schemes of work are so devised to suit the capacities and needs of these children that they will experience success in their school work and so come to realise the resultant sense of confidence and security that is so essential to the wholesome development of personality.

### 3. **Sport.**

- (a) Boys and girls have attended swimming lessons once per week at the Livingstone Road Baths. As a result the following certificates have been obtained :—

1st Class — 2 Boys.  
 2nd Class — 2 Boys.  
 3rd Class — 4 Boys and 6 Girls.  
 Total—14.

- (b) Football and Netball Teams have been formed and matches played with other schools.  
 (c) The school again competed in the Schools' Athletic Competition.

### 4. **Speech Therapy.**

Three children with marked defects have attended the Speech Therapist. They are receiving valuable assistance and will benefit permanently.

### 5. **School Outing.**

The Annual Outing was held on Thursday, 23rd June, 1949, when 88 children and the whole of the staff spent an enjoyable day at Dudley Zoo.

### 6. **Open Days.**

- (a) Open Day for parents and friends to see the work of the school was held on the 22nd of June, when 52 parents attended.  
 (b) Christmas Plays and Craft Exhibition took place on 15th December. The dialogue, costumes, scenery and properties of the plays were the work of the children.

One of the pleasing features of 1949 has been the very marked interest displayed, not only by parents, in the work of the school, but by the staffs of other schools.

### 7. **Waiting List.**

This now stands at 135, and I view it with the utmost concern. The only solution is the speedy provision of not only more accommodation but of more suitable accommodation in which the children will not be deprived of so many amenities.

### 8. **Attendance.**

Average attendance for	1947 — 71%
„ „ „	1948 — 85%
„ „ „	1949 — 89%

Dr. Moir visits the school for one day per week (each Wednesday) for the purpose of re-testing children on trial and for making periodic tests with other pupils.

I should like to pay tribute to her for her work on behalf of these children and also to my staff, who, by their enthusiasm, self-sacrifice and devotion to the welfare of these children, have created a happy and efficient school in spite of their arduous task being made increasingly difficult by being housed in too small and unsuitable premises."

## SPEECH THERAPY

The following is a report by Miss B. Carr, Speech Therapist :

" The past year in the Speech Therapy Department was a busy one. As the waiting list had grown so considerably it became necessary to select carefully those children who were most in need of regular weekly lessons, and cases of minor defects could only be seen occasionally. A wide range of speech defects was referred.

It is a well known fact that any treatment which can be given to benefit a person's general condition will have a good effect upon speech. The therapist received valuable aid from other Departments. For instance, seven children were referred to the psychiatrist for advice and treatment. The speech defects were but symptoms of emotional disturbances and psychological help was of first importance. Intelligence tests given by a doctor at the School Clinic, or an Educational Psychologist, decided whether defects were due to mental retardation. In cases for which specialized education was found to be necessary, there was often a marked adjustment in speech when children had been transferred to The Grove School. It was noticeable that a speech defect varied with an individual's level of health, and after a period at Corley Open-Air School many children made excellent speech progress.

Three cases of speech defect due to defective hearing attended during 1949. As a result of an Audiometric Test at the Coventry and Warwickshire Hospital, one boy was fitted with a hearing aid which will prove of inestimable value towards the acquisition of clear speech. Another child commenced lip reading lessons.

Five children suffering from cerebral palsy attended regularly and the mothers were very co-operative in home practice. The speech therapist visited centres for spastic and athetoid children at The Princess Louise Hospital for Children, Kensington, and Carlson House School, Edgbaston. One of Coventry's spastic cases was admitted to the waiting list for St. Margaret's School, Croydon."

The following are the year's figures relating to the speech therapy clinic :—

Attendances	...	...	...	...	...	...	2,179
Number of new cases	...	...	...	...	...	...	73
Number of cases treated or now under treatment	...						153
Number of interviews with parents	...	...	...				399
Number of cases discharged	...	,...	...	...			37
Number of cases discharged temporarily	...						36
Number of cases found unsuitable for speech therapy							7
Number of cases on waiting list 31st December, 1949							61

### Wyre Farm Camp School.

There were 138 boys (165 in 1948) admitted to the Camp School during the year. All the boys are medically examined before admission and return to the school after the school holidays. The following is the report submitted by Dr. Stanbury on behalf of the Medical Officer (Dr. J. S. Jerome) :—

" During the past year the standard of health at the school has been high. There were no outbreaks of epidemic or infectious diseases, and undoubtedly the long dry summer was particularly favourable to the health and work of the school.

There were 220 admissions to the sick bay, considerably less than in the previous year. The number of accidents was small, and only three of these were fractures. One case of osteomyelitis, after surgical advice, was successfully treated in sick bay. There were a large number of attendances as 'out-patients'. Many of these required little medical treatment and were dealt with by Miss Wakelin (Matron) and her assistant nurse. In the absence of parents, reassurance in these small matters is apparently necessary and valuable. All cases requiring specialist advice or treatment were referred to Kidderminster General Hospital.

As in previous years there were numerous out-of-school activities, and the boys took full advantage of the facilities provided for physical recreation and general educational activities. The improvement in physique shown by most boys testifies to the healthy influence of their environment and daily routine."

The following are the year's figures relating to boys who have received special treatment.

JANUARY TO DECEMBER, 1949.

Cases—treated in Surgery ... ..	14,837
(mostly very minor trouble)—splinters, boils, coughs, colds, headaches.	
Boys visiting Doctor's House ... ..	17
Numbers of visits to Hospital, including 7 X-rays ...	42
Visits to Optician at Kidderminster for eye testing and re-adjusting glasses ... ..	2
<i>Operations for Boys</i> ... ..	3
2 Tonsillectomy.	
1 Finger nail removed, under gas in Casualty.	
<i>Fractures</i> ... ..	3
2 Wrist, and 1 small bone in hand.	
<i>Sick Masters</i> ... ..	2
1 Blood Pressure.	
1 Tonsillitis.	
<i>Number of boys visiting Dentist in Kidderminster</i> ...	18
9 Extractions.	
7 Fillings.	
1 Boy had wire fixed to teeth (2 visits).	
<i>Number of new glasses</i> ... ..	4
<i>Wet beds</i> at end of term from 8—12 each day ...	8—12
<i>Heads with stray nits</i> ... ..	38
<i>Scabies</i> ... ..	12
<i>Intra Muscular Injections given at school</i> ... ..	35
27 Penicillin injections.	
6 for boils.	
4 „ septic hands.	
17 „ boy with Osteomyelitis.	
3 Manganese Butyrate 1% for boils.	
3 Bismuth for verrucas.	

*Chief Cases in Sick Bay.*

- 1 Breast Abscess.
- 1 Osteomyelitis.
- 8 Otitis Media.
- 2 Asthma.
- 5 Boils.
- Scalded Foot.
- Bad Coughs and Colds.
- 10 Tonsillitis.
- Squashed Finger in door.
- Boy fell down waterfall 16ft. (cut behind big toe and abrasions).
- Several septic feet.
- No infectious complaints, such as Measles, etc.
- Stings by Wasps all over head.
- Cut wrist, 3 stitches, 1 clip.
- 2 boys after Tonsillectomy.

*Visits to Kidderminster Hospital* ... .. 42

- 7 X-rays and visits to Surgeon.
- 9 other visits to Surgeon.
- 4 visits to and from hospital for boys (2) for T's and A's.
- 3 visits to Skin Hospital.
- 17 visits to Eye Specialist for examination and treatment.
- 2 boys for E.N.T. specialist.

*Diet.* Consists of a good plain diet—boys usually gain weight. During the Summer holidays W.F.C. was open to Coventry children and their teachers for 4 weeks. Everything went well and there were very few casualties.

*Dentist and Nurse.* In April and June, Mr. Raeside and Nurse Batsford paid us a visit and examined all the boys' teeth, and notified the parents of those requiring treatment, which was given at Coventry Clinic.

**Clinic Sessions.**

The current arrangements in regard to clinic sessions are set out below :—

CENTRAL SCHOOL CLINIC, GULSON ROAD.

*Minor Ailment Clinics*, each afternoon and Saturday mornings.

Cleansings, each morning.

*Medical Officer appointments* :—

Tuesday afternoons.

Saturday mornings.

*Chiropody* :—

By appointment, Friday mornings.

*Dental Clinic :—*

By appointment each day and Saturday mornings.

*Ear, Nose and Throat Clinic :—*

By appointment Wednesday mornings, and in addition every 4th week Wednesday afternoons.

Treatment sessions every afternoon (includes "infra-red" treatment).

*Eye Clinic :—*

Tuesday mornings.

Wednesday afternoons.

*Heart and Rheumatic Clinic :—*

By appointment alternate Thursday mornings.

*Orthoptic Clinic :—*

Each day, including Saturday mornings.

*Ringworm—X-ray treatment :—*

By appointment.

*Scabies Clinic :—*

Each day, Monday to Friday.

*" Spastic " Clinic :—*

By appointment, alternate Saturday mornings.

*Speech Therapy :—*

Each day, Monday to Friday.

*Sunlight Clinic :—*

Tuesday and Friday mornings.

## BRANCH CLINIC.

*Windmill Road :—*

Medical Officer in attendance Tuesday and Friday, from 3.45 p.m.

School Nurse in attendance each afternoon.

*Whoberley Clinic :—*

Medical Officer in attendance Monday afternoons from 3.30 p.m.

School Nurse in attendance every afternoon.

*Binley Clinic :—*

School Nurse in attendance Wednesday afternoons from 2 p.m.

Medical Officer attends by arrangement.



### Attendances at the Clinics during 1949:—

CONDITIONS.	Central School Clinic, Gulson Road		Binley School Branch Clinic.		Windmill Rd. School Branch Clinic		Whoberley School Branch Clinic.	
	Cases.	Attend- ances	Cases.	Attend- ances.	Cases.	Attend- ances.	Cases.	Attend- ances
Skin:—								
Ringworm—scalp—								
X-ray treatment..	1				1			
Other treatment..	2				—			
Ringworm—body ..	27				1		3	
Scabies .. ..	76				—		—	
Impetigo .. ..	104		31		28		47	
Other skin diseases	119		8		19		66	
Eye Disease:—								
Blepharitis ..	16		—		6		19	
Conjunctivitis ..	62		3		18		28	
Phlyctenular ulcer	—		—		—		—	
Corneal ulcer ..	—		—		—		—	
Styes .. ..	24		10		13		40	
Other .. ..	8	6372	—	1083	—	2505	—	4267
Ear Defects:—								
Otorrhœa .. ..	76		7		9		19	
Wax .. ..	72		2		4		13	
Other .. ..	8		13		—		—	
Miscellaneous:—								
Septic conditions ..	228		142		41		150	
Sores .. ..	121		78		40		181	
Boils .. ..	100		12		24		43	
Chilblains .. ..	7		4		2		6	
Warts .. ..	77		35		44		108	
Injuries .. ..	180		4		219		348	
Other conditions ..	223		475		153		304	
Totals ..	1525	6372	831	1083	622	2505	2375	4267

### Deaths of Children of School Age—5 years to 15 years are as follows:—

Diphtheria .. .. .	1
Tuberculosis of Respiratory System .. .. .	2
Other forms of Tuberculosis .. .. .	4
Cancer of buccal cavity and œsophagus (M) .. .. .	1
Cancer of all other sites .. .. .	1
Heart disease .. .. .	1
Other diseases of Circulatory System .. .. .	1
Pneumonia .. .. .	1
Gastrointestinal .. .. .	1
Nephritis .. .. .	1
Congenital malformations,	
Birth injuries	
Infant diseases .. .. .	1
Road Traffic Accidents .. .. .	2
Other violent causes .. .. .	7
All other causes .. .. .	5
Total .. .. .	29

## PRIMARY AND SECONDARY EDUCATION.

Table I.

## A. ROUTINE MEDICAL INSPECTIONS.

Entrants	..	..	..	3657
2nd Age Group	..	..	..	1742
3rd Age Group	..	..	..	1209
			Total	6608
Other Routine Inspections	..	..		1952
			GRAND TOTAL	8560

## B. OTHER INSPECTIONS.

No. of Special Inspections and Re inspections	..	6101
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Table II.

No. of Pupils Inspected	..	..	8560	—
General condition A (Good)	..	..	3666	42.8%
„ „ B (Fair)	..	..	4774	55.8%
„ „ C (Poor)	..	..	120	1.4%

Table III.

## GROUP I.

## TREATMENT OF MINOR AILMENTS (EXCLUDING UNCLEANLINESS)

Total number of defects treated or under treatment	
during the year under the Authority's Scheme	.. 4359

## GROUP II.

## TREATMENT OF DEFECTIVE VISION AND SQUINT.

Errors of Refraction (including Squint)	..	1335	
Other defect or disease of the eyes (excluding those recorded under Group I)	..	14	
		—	1349
Number of Children for whom spectacles were prescribed			941



Received operative treatment under the Authority's Scheme .. .. .	641
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(a) Number treated as in-patients in hospitals or hospital schools .. .. .	54
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GROUP V.—CHILD GUIDANCE TREATMENT AND SPEECH THERAPY.

(a)	Under Child Guidance arrangements	...	122
(b)	Under Speech Therapy arrangements	...	73

Number of Pupils who were :—

(1)	Inspected by Dentist:	Routine Age Groups	..	..	6273	
		Specials	..	..	3059	
		TOTAL	..	..		9332
(2)	Found to require treatment	..	..	..	..	11020
(3)	Actually treated	..	..	..	..	8188
(4)	Attendances made by Pupils for treatment	..	..	..	..	13424
(5)	Half-days devoted to :	(a) Inspection	..	..	54	
	" "	(b) Treatment	..	..	2096	
		TOTAL (a) and (b)	..	..		2150
(6)	Fillings, Permanent Teeth	..	..	..	2595	
	" Temporary Teeth	..	..	..	642	
		TOTAL	..	..		3237
(7)	Extractions, Permanent Teeth	..	..	..	2209	
	" Temporary Teeth	..	..	..	11108	
		TOTAL	..	..		13317
(8)	Administrations of general anaesthetics for extractions	..				1494
(9)	Other operations : (a) Permanent Teeth	..	..	..	1672	
	" " (b) Temporary Teeth	..	..	..	307	
		TOTAL (a) and (b)	..	..		1979
(10)	Orthodontic appliances	..	..	..	..	108

**Table V.—Verminous Conditions.**

(1) Average number of visits per school made during the year by School Nurses .. .. .	8
(2) Total number of examinations of pupils in the Schools by School Nurses .. .. .	117033
(3) Number of individual pupils found unclean .. ..	1230
(4) Number of cleansing notices issued under Section 54 (2) Education Act, 1944 ... ..	305
(5) Number of cleansing orders issued under Section 54 (3) Education Act, 1944 .. .. .	21

**HANDICAPPED PUPILS.**

**Number of children (a) ascertained in accordance with the Education Act, 1944, during the year 1949, (b) in Special Schools at 31st December, 1949, and (c) awaiting admission to Special Schools**

TYPE OF HANDICAP	Ascertained during year	Total number of pupils in Special Schools	Total number awaiting admission to Special Schools
Blind ... ..	Nil	12	2
Partially Sighted ... ..	1		
Deaf ... ..	2	36	4
Partially Deaf ... ..	1		
Delicate ... ..	129	98*	107
Diabetic ... ..	—	—	—
Educationally Sub-normal:—			
Boarding School ... ..	10	16	20
Day Special School ... ..	70	92	135
Ordinary School ... ..	52	—	—
Epileptic ... ..	1	5	3
Mal-Adjusted ... ..	3	2	9
Physically Handicapped ... ..	2	29	72*
Speech Defects ... ..	73	—	61
			(awaiting speech therapy)
Multiple Disabilities ... ..	9	3	3
Found to be :—			
(a) Ineducable ... ..	20	—	—
(b) In need of supervision after leaving school ... ..	10	—	—
<b>TOTALS</b>	<b>383</b>	<b>293</b>	<b>416</b>

\* Includes children suffering from Multiple defects.